JAN 0 8 2003 4 Submit an original, and a du	RANSMITTAL	CPA) CHECK BOX, if applicable: DUPLICATE						
Address Commissioner for Patents Box CPA Washington, DC 20231	Attorney Docket No. First Named Inventor Examiner Name Group Art Unit Express Mail Label No.	03630.000207 ANDREW J. KRASLAVSKY Jungwon Chang 2154						
This is a request for a X continuation or divisional application under 37 CFR 1.53(d). CFR 1.53(
FILING QUALIFICATIONS: The prior application identified above must by 37 CFR § 1.51(b), or (2) the national stage of an international application term issuing from a CPA, except for reissues and designs, to the effect patent term provisions of 35 U.S.C. § 154(a)(2). Therefore, the prior ap 1995. C-I-P NOT PERMITTED: A continuation-in-part application cannot be fine filling attemption of the filling of the filling of the filling date of the request for a CPA. 37 CFR § 1.53(b) must be used application that is not to be abandoned. ACCESS TO PRIOR APPLICATION: The filling of this CPA will be conducted uninformation concerning, the prior application may be given similar access or applications in the file jacket. 35 U.S.C. 120 STATEMENT: In a CPA, no reference to the prior application is seference required by 35 U.S.C. 120 and to every application assigned.	ation in compliance with 35 U.S.C. 371. A Not that the patent issued on a CPA and is subsplication of a CPA may have been filed beformation of a CPA under 37 CFR § 1.53(d), but not be a continuation of the second	otice will be placed on a spect to the twenty-year re, on or after June 8, nust be filed under 37 CFR the prior application as of tion-in-part of an ses to, copies of, or ning, the other application pecification and none r a CPA is the specific						
Enter the unentered amendment previously filed on under 37 CFR § 1.116 in the prior nonprovisional application. a. X A preliminary amendment is enclosed. b. The applicant(s) presently intend(s) to file additional papers in this case shortly. Should the Examiner take this case up for action before receiving such papers, it is respectfully requested that the Examiner contact the attorneys for the applicant(s). This application is filed by fewer than all the inventors named in the prior application, 37 CFR § 1.53(d)(4). a. DELETE the following inventor(s) named in the prior nonprovisional application:								
 b.	to be entered prior to entry of sed. 01/09/2003 CCHAU1 00 01 FC:1006 02 FC:1202 03 FC:1201							

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	CLAIMS	(1) FOR	NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS				
		TOTAL CLAIMS (37 CFR § 1.16(c) or (j))	34-20 =	14	X \$ 18.00 =	\$ 252.00				
		INDEPENDENT CLAII (37 CFR § 1.16(b) or (i))	MS 5-3 =	2	X \$ 84.00 =	\$ 168.00				
		MULTIPLE DEPENI	DENT CLAIMS (if applicable) (37	CFR § 1.16(d))	\$280.00 =	\$ 280.00				
		BASIC FEE (\$ 750.00 (37 CFR § 1.16(a))								
				Total of	above calculations =	\$ 1,450.00				
į		Reduction by 50% for filing by small entity (Note 37 CFR §§ 1.9, 1.27, 1.28).								
					TOTAL =	\$ 1,450.00				
	6. S	Small entity status								
	а	a. A small entity statement is enclosed								
	b	b. A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.								
	C.	Is no	longer claimed.							
	7.	Small entity status: Applicant claims small entity status. See 37 CFR § 1.27.								
	8.	X A check in the amount of \$ 1,450.00 is enclosed.								
	9. T D	The Commissioner is hereby authorized to credit overpayments or charge deficiencies in the following fees to Deposit Account No. 06-1205:								
	a	a. X Fees required under 37 CFR § 1.16.								
	b.	=	required under 37 CFR § 1.1							
	c.		required under 37 CFR § 1.18		u thung mouths /Fac	of \$420.00 magnified				
	10.	Applicant requests suspension of action under 37 CFR § 1.103(b) for three months. (Fee of \$130.00 required under 37 CFR § 1.17(i) is enclosed).								
	11. a	. Rece	ipt For Facsimile Transmitted	CPA (PTO/SB/29A).						
	b	X Retur	n Receipt Postcard (Should b	e specifically itemized.	See MPEP 503).					
	12.	X Other Petition	For Extension Of Time and c	heck for \$930.00.						
NOTE: The prior application's correspondence address will carry over to this CPA UNLESS a new correspondence address is provided below										
13. NEW CORRESPONDENCE ADDRESS										
	C	Customer Number or Bar Code Label (hsert Customer No. br Attach bar code tabel here)								
	NAME									
	ADDRESS	s								
H	CITY	Y STATE ZIP CODE								
	COUNTRY		TELEPHONE		FAX					
	SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED									
	NAME , Scott D. Malpede									
	SIGNATURE WIT O. MINISTER									
	REGISTRATION NO. 32,533									
	DATE January 8, 2003									

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